



Open Enrollment Overview

This Job Aid provides a walkthrough of the enrollment steps users need to complete during Open Enrollment (OE) in Cardinal Employee Self-Service (ESS).

The dates shown throughout this Job Aid were taken for the 2024 Open Enrollment time frame. However, the process contained in this Job Aid applies to all Open Enrollment dates.

Throughout the Job Aid, there will be verbiage blurred out on the screenshots. Please remember to read the instructions and the fine print on the actual pages in Cardinal when going through the Open Enrollment steps.

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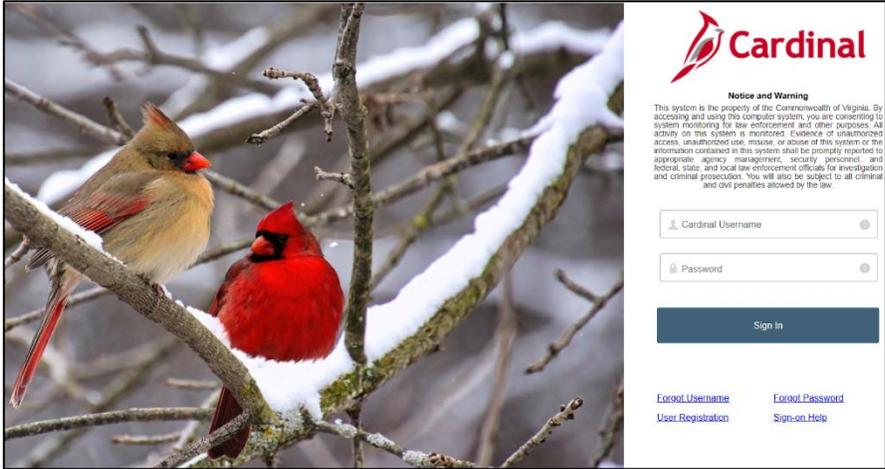
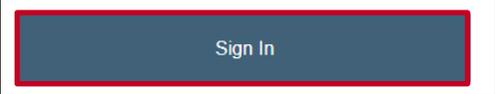
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Revision History

Revision Date	Summary of Changes
5/19/2025	Per OHB, updated the timeframe for employee's to submit supporting documentation for their dependents from 60 days to 30 days.
9/4/2024	Baseline

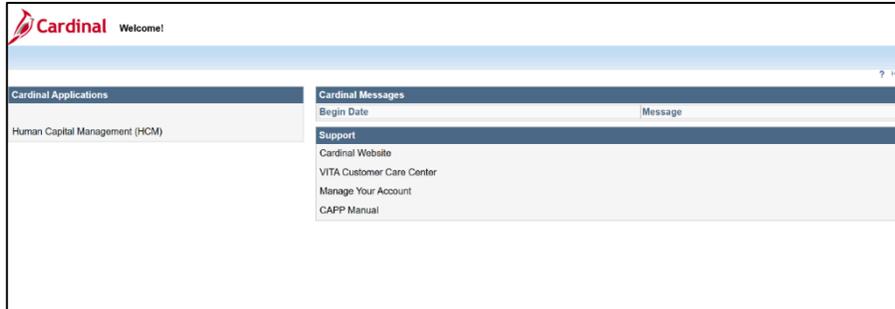
Making Open Enrollment Elections in ESS

The Open Enrollment process contained in this Job Aid can only be completed during the Open Enrollment (OE) period. Outside of the OE window, employees can only change their benefits through a Life Event (i.e., Birth, Adoption, Divorce, Marriage, etc.) in Employee Self-Service or by contacting their agency Benefits Administrator (BA).

Step	Action
1.	Log into Cardinal (my.cardinal.virginia.gov).
<p>The Cardinal Login page displays.</p> <div data-bbox="376 667 1261 1136" style="border: 1px solid black; padding: 10px;">  </div>	
2.	<p>Enter the Employee Username and Password in the Cardinal Username and Password field.</p> <div data-bbox="266 1224 711 1381" style="border: 1px solid black; padding: 5px;">  </div>
3.	<p>Click the Sign In button.</p> <div data-bbox="266 1476 761 1570" style="border: 1px solid black; padding: 5px;">  </div>

Step	Action
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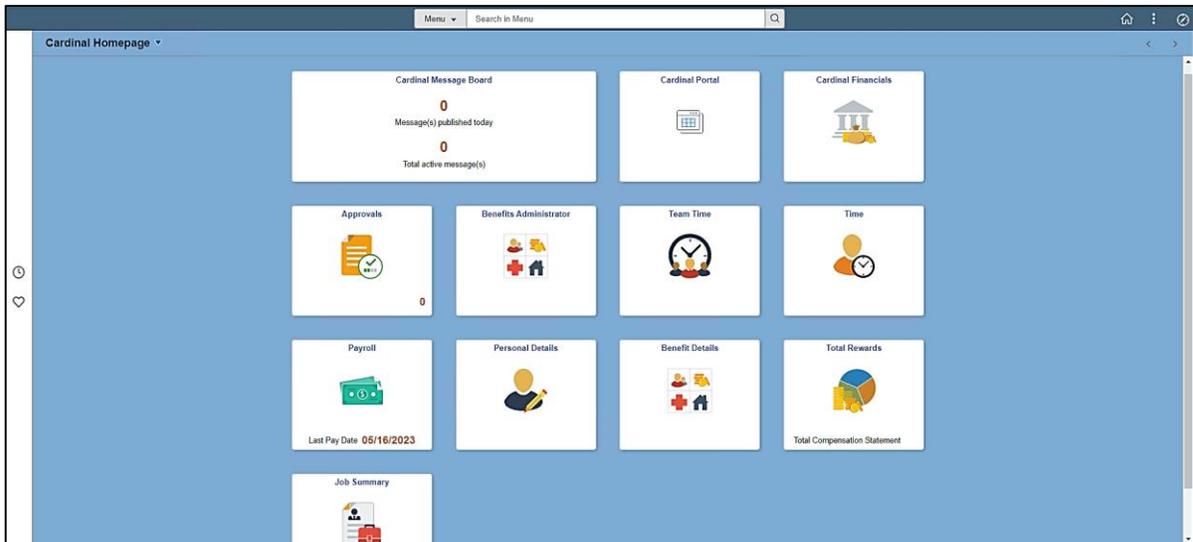
The **Portal Welcome** page displays.



4. Click the **Human Capital Management** link.

Human Capital Management (HCM)

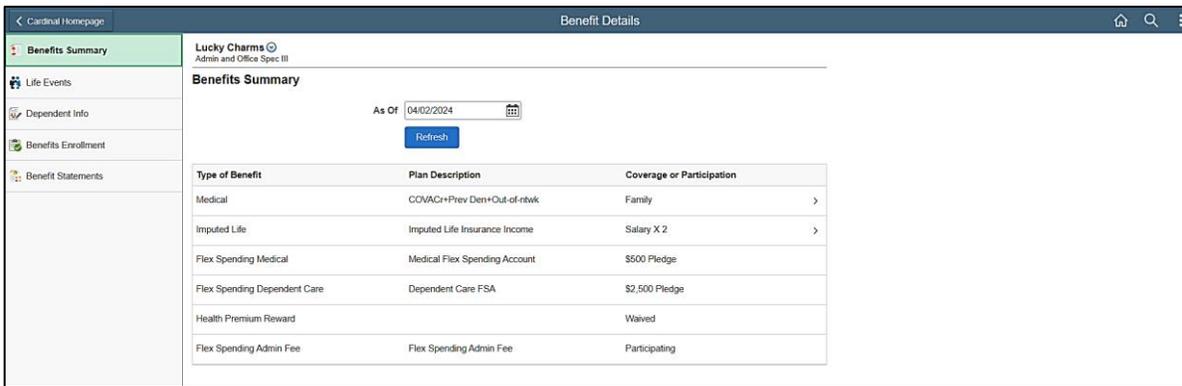
The **Cardinal Homepage** displays.



The tiles displayed on the **Cardinal Homepage** for each user will vary based upon individual preferences and security settings.

Step	Action
5.	Click the Benefit Details tile. <div style="border: 2px solid red; padding: 10px; margin: 10px 0;">  </div>

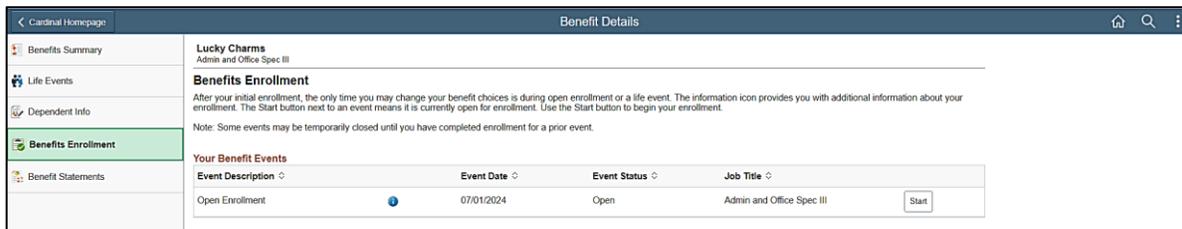
The **Benefits Details** page displays with the **Benefits Summary** tab displayed by default.



Type of Benefit	Plan Description	Coverage or Participation
Medical	COVAC+Prev Den+Out-of-rtwk	Family
Imputed Life	Imputed Life Insurance Income	Salary X 2
Flex Spending Medical	Medical Flex Spending Account	\$500 Pledge
Flex Spending Dependent Care	Dependent Care FSA	\$2,500 Pledge
Health Premium Reward		Waived
Flex Spending Admin Fee	Flex Spending Admin Fee	Participating

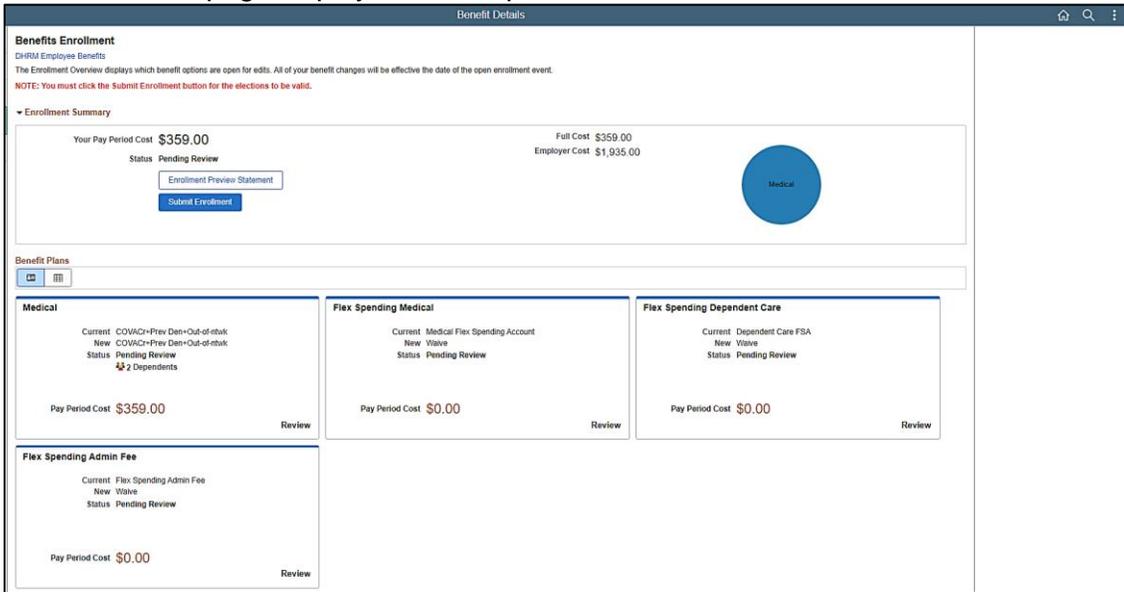
6.	Click the Benefits Enrollment menu item on the left-hand side of the page. <div style="border: 2px solid red; padding: 10px; margin: 10px 0;">  </div>
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The **Benefits Enrollment** page displays.



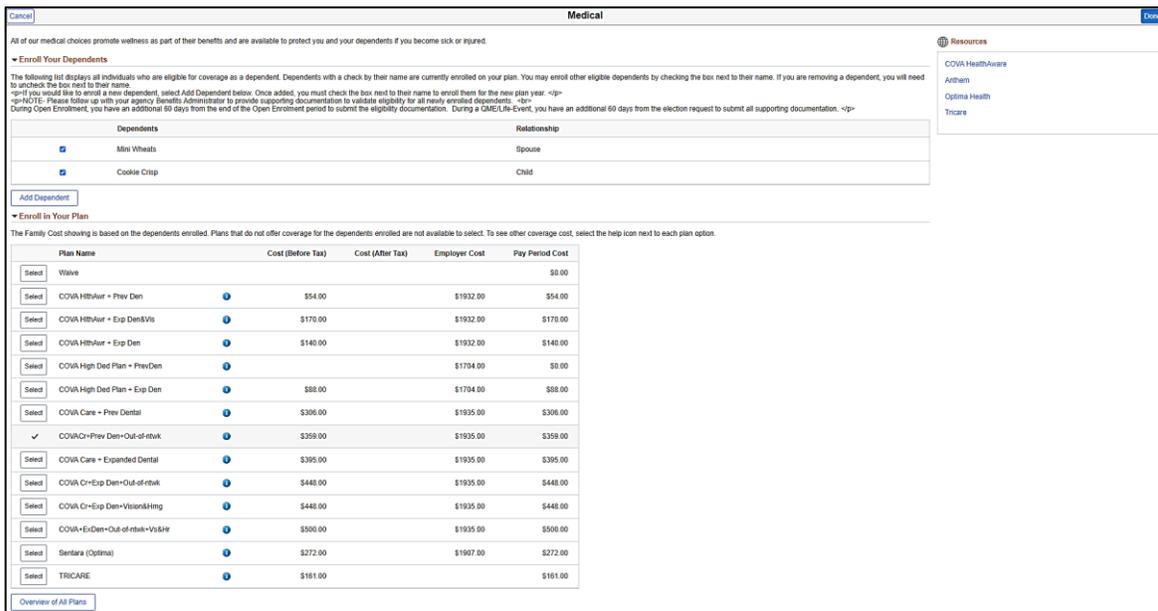
Event Description	Event Date	Event Status	Job Title
Open Enrollment	07/01/2024	Open	Admin and Office Spec III

7.	Click the Start button for the Open Enrollment event. <div style="border: 2px solid red; padding: 10px; margin: 10px 0;">  </div>
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Step	Action
	<p>If you have already completed any elections for this Open Enrollment and you need to make updates or any additional elections, the Status for the Open Enrollment event will be "Submitted" and the Start button will be replaced with a Re-Elect or a Resume button.</p>
	<p>The Benefits Enrollment page displays for the Open Enrollment.</p>  <p>The screenshot shows the 'Benefits Enrollment' page with an enrollment summary and four benefit plan tiles: Medical, Flex Spending Medical, Flex Spending Dependent Care, and Flex Spending Admin Fee. The Medical tile is highlighted with a blue circle.</p>
	<p>The Benefit Plans available on this page depend on your benefits eligibility. Retirees will only see the Medical tile. The steps within this Job Aid start by detailing the steps for changing your Health Plan (Medical tile). Proceed to the applicable Step for the plan you need to enroll in based on the following:</p> <ul style="list-style-type: none"> • Health Plan: Step 8 • Flex Spending Medical: Step 36 • Flex Spending Dependent Care: Step 42
<p>8.</p>	<p>Review your current enrollment information within the Medical tile. The New enrollment information defaults with the same enrollment information.</p>  <p>The close-up screenshot shows the 'Medical' tile with a red box highlighting the enrollment details: Current COVACr+Prev Den+Out-of-ntwk, New COVACr+Prev Den+Out-of-ntwk, Status Pending Review, 2 Dependents, and Pay Period Cost \$359.00.</p>

Step	Action
9.	<p>Click the Medical tile to begin the enrollment process.</p> 

The **Medical** page displays.



All of our medical choices promote wellness as part of their benefits and are available to protect you and your dependents if you become sick or injured.

Enroll Your Dependents

The following list displays all individuals who are eligible for coverage as a dependent. Dependents with a check by their name are currently enrolled on your plan. You may enroll other eligible dependents by checking the box next to their name. If you are removing a dependent, you will need to uncheck the box next to their name.

*If you would like to enroll a new dependent, select Add Dependent below. Once added, you must check the box next to their name to enroll them for the new plan year. *If you are removing a dependent, you will need to uncheck the box next to their name. *If you are removing a dependent, you will need to uncheck the box next to their name. *If you are removing a dependent, you will need to uncheck the box next to their name.

*NOTE: Please follow up with your agency Benefits Administrator to provide supporting documentation to validate eligibility for all newly enrolled dependents. *If you are removing a dependent, you will need to uncheck the box next to their name. *If you are removing a dependent, you will need to uncheck the box next to their name.

During Open Enrollment, you have an additional 60 days from the end of the Open Enrollment period to submit the eligibility documentation. During a QMCLife-Event, you have an additional 60 days from the election request to submit all supporting documentation. *If you are removing a dependent, you will need to uncheck the box next to their name.

Dependents	Relationship
<input checked="" type="checkbox"/> Mini Wheats	Spouse
<input checked="" type="checkbox"/> Cookie Crisp	Child

[Add Dependent](#)

Enroll in Your Plan

The Family Cost showing is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select. To see other coverage cost, select the help icon next to each plan option.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
<input type="radio"/> Waive				\$0.00
<input type="radio"/> COVA HbA1c + Prev Den	\$54.00	\$54.00	\$1932.00	\$54.00
<input type="radio"/> COVA HbA1c + Exp Den+Vls	\$170.00	\$170.00	\$1932.00	\$170.00
<input type="radio"/> COVA HbA1c + Exp Den	\$140.00	\$140.00	\$1932.00	\$140.00
<input type="radio"/> COVA High Ded Plan + Prev Den	\$0.00	\$0.00	\$1704.00	\$0.00
<input type="radio"/> COVA High Ded Plan + Exp Den	\$88.00	\$88.00	\$1704.00	\$88.00
<input type="radio"/> COVA Care + Prev Dental	\$306.00	\$306.00	\$1935.00	\$306.00
<input checked="" type="radio"/> COVAC+Prev Den+Out-of-rtbk	\$359.00	\$359.00	\$1935.00	\$359.00
<input type="radio"/> COVA Care + Expanded Dental	\$395.00	\$395.00	\$1935.00	\$395.00
<input type="radio"/> COVA Cr+Exp Den+Out-of-rtbk	\$448.00	\$448.00	\$1935.00	\$448.00
<input type="radio"/> COVA Cr+Exp Den+Vision+Hmg	\$448.00	\$448.00	\$1935.00	\$448.00
<input type="radio"/> COVA+ExDen+Out-of-rtbk+VlsHr	\$500.00	\$500.00	\$1935.00	\$500.00
<input type="radio"/> Sterata (Optima)	\$272.00	\$272.00	\$1907.00	\$272.00
<input type="radio"/> TRICARE	\$161.00	\$161.00		\$161.00

[Overview of All Plans](#)

10.	<p>Review the existing dependents covered under your health plan within the Enroll Your Dependents section to determine if changes are needed.</p> 
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11.	<p>If you need to add a dependent to your health plan coverage, click the Add Dependent button. If you are not adding a dependent, skip to Step 32.</p> 
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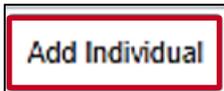
	<p>Only add dependents that will be covered under your health plan. Do not add any beneficiaries into Cardinal. Beneficiaries (for life insurance or retirement) are not tracked in Cardinal. See your agency Benefits Administrator for any additional questions related to beneficiaries.</p>
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Step	Action
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The **Dependent Information** page displays.

Dependent Information			
Name	Relationship	Dependent	Dependent Type
Mix Wheat	Spouse	✓	Approved Dependent
Cookie Crisp	Child	✓	Approved Dependent

12. Click the **Add Individual** button to add a dependent to your Employee Record.



The **Individual Dependent Information** page displays.

Cancel Save

Select Save after you have edited your Dependent's information. The changes will go into effect on Apr 2, 2024.

Name

Add Name

Personal Information

*Date of Birth

*Gender

*Relationship to Employee

*Marital Status Single As of

*Student No As of

Disabled No As of

*Smoker Non Smoker As of

Address

Address	Address Type	Same as mine
147 Canal St Richmond, VA 23220	Home	Same as mine

National ID

No data exists

Add National ID

Phone

No data exists

Add Phone

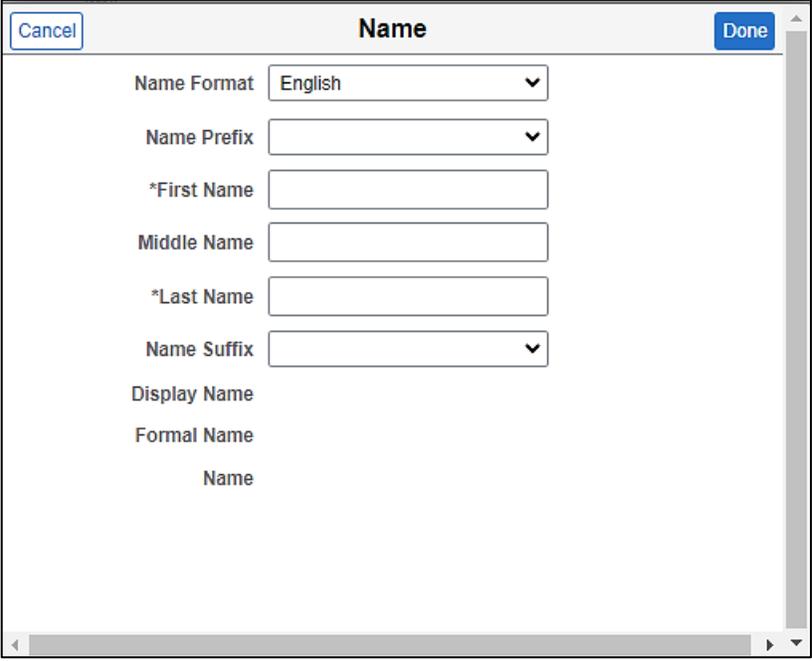
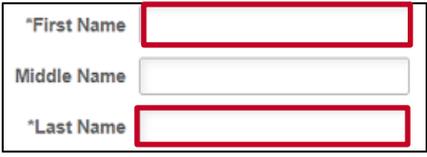
Email

No data exists

Add Email

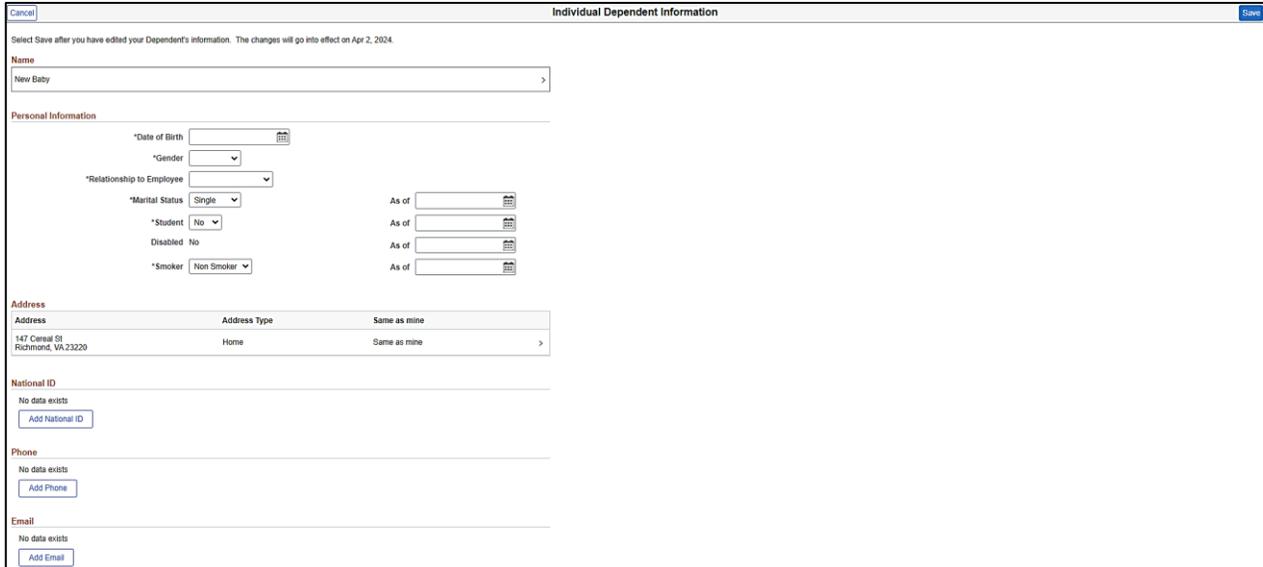
13. Click the **Add Name** button.



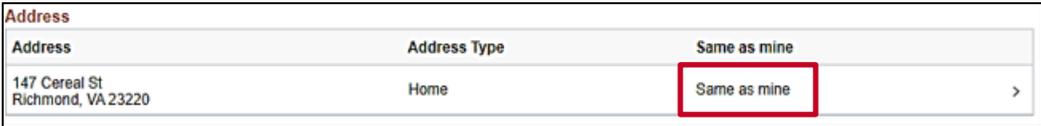
Step	Action
	<p>The Name page displays in a pop-up window.</p> 
14.	<p>Enter your dependent's name information in the corresponding fields. The First Name and Last Name fields are required.</p> 
	<p>Suffixes should only be entered in the Name Suffix field.</p>
15.	<p>Click the Done button.</p> 

Step	Action
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The **Individual Dependent Information** page redispays with the name populated.



16.	Enter your dependent’s date of birth in the Date of Birth field or select the appropriate date of birth using the Date of Birth Calendar icon. <div data-bbox="261 1064 920 1140" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Date of Birth <input style="border: 1px solid red;" type="text"/>  </div>
17.	Select your dependent’s gender using the Gender dropdown button. <div data-bbox="261 1226 920 1293" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> *Gender <input style="border: 1px solid red;" type="text"/> </div>
18.	Select your dependent’s relationship to you using the Relationship to Employee dropdown button. <div data-bbox="261 1413 920 1472" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> *Relationship to Employee <input style="border: 1px solid red;" type="text"/> </div>
19.	Update your dependent’s marital status using the Marital Status dropdown button as needed (defaults to “Single”). <div data-bbox="261 1591 1037 1640" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> *Marital Status <input style="border: 1px solid red;" type="text"/> As of <input style="border: 1px solid red;" type="text"/> </div>
20.	The Student field defaults to “No”. There is no requirement to update this field as the Student field is not tracked in Cardinal nor transmitted to the Health Benefits Vendor. <div data-bbox="261 1759 1037 1812" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> *Student <input type="text"/> As of <input type="text"/> </div>

Step	Action
21.	<p>The Disabled field defaults to “No”. Do not change this value.</p> 
	<p>If your dependent is “Disabled”, you must provide proof of disability to your agency Benefits Administrator outside of Cardinal.</p>
22.	<p>The Smoker field defaults to “No”. Do not update this field as Cardinal does not track nor transmit smoker status to the Health Benefits Vendor.</p> 
23.	<p>If your dependent has the same address as you do, verify that the Address section is set to “Same as mine”.</p> 
	<p>If your dependent has a different address than you, click on the address row and edit the dependent’s address information accordingly.</p>
24.	<p>Click the Add National ID button within the National ID section.</p> 
<p>The National ID page displays in a pop-up window.</p> 	

Step	Action
25.	<p>Complete the Country, National ID Type, and National ID (SSN) fields for the dependent.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>*Country <input style="width: 150px;" type="text" value=""/></p> <p>*National ID Type <input style="width: 150px;" type="text" value=""/></p> <p>*National ID <input style="width: 150px;" type="text" value=""/></p> </div>
	If you don't have an SSN for your dependent, the record will save without a National ID entered. However, your agency Benefits Administrator will reach out to obtain the SSN in the future.
	"No" can only be selected for the Primary slide field if there is more than one type of National ID listed for the dependent (e.g., dual citizenship).
26.	<p>Click the Done button.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0; text-align: center;"> <p>Done</p> </div>

The **Individual Dependent Information** page redisplay.

Cancel Individual Dependent Information Save

Select Save after you have edited your Dependent's information. The changes will go into effect on Apr 2, 2024.

Name
New Baby >

Personal Information

*Date of Birth

*Gender

*Relationship to Employee

*Marital Status As of

*Student As of

Disabled As of

*Smoker As of

Address

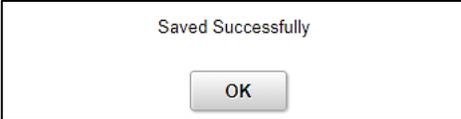
Address	Address Type	Same as mine
147 Canal St Richmond, VA 23220	Home	Same as mine >

National ID

Country	National ID Type	National ID	Primary
United States	Social Security Number	001-95-8293	✓ >

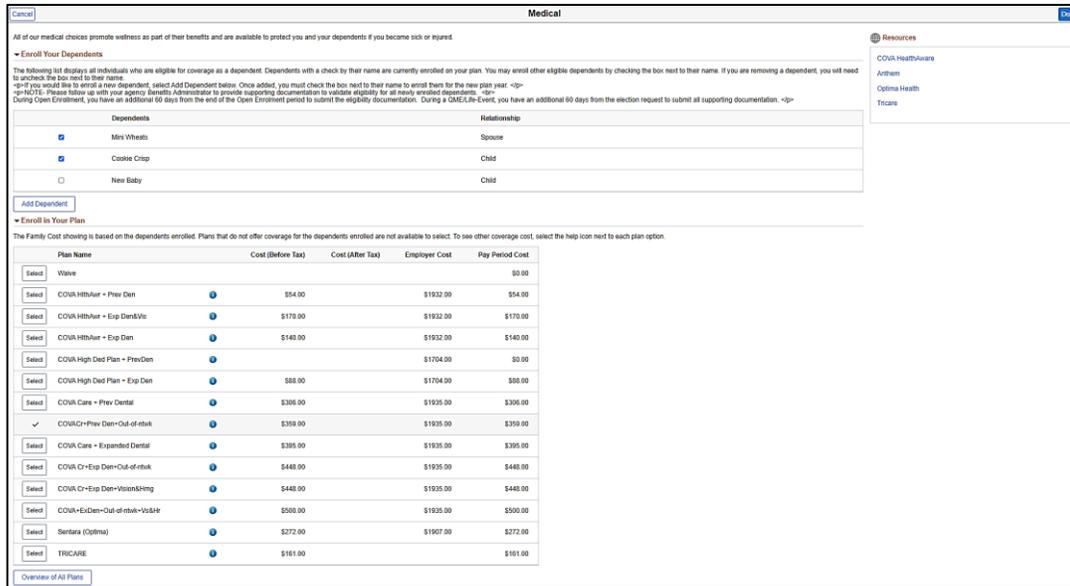
Phone
No data exists

Email
No data exists

Step	Action
27.	Optionally add phone or email information for the dependent. These are not required for dependents. 
28.	Click the Save button in the top right-hand corner of the page. 
A Saved Successfully message displays in a pop-up window. 	
29.	Click the OK button. 
The Dependent Information page returns. 	
30.	Repeat Steps 12 – 29 as required until all dependents are added.
	When adding dependents to coverage, supporting documentation is required that provides proof of eligibility. Do not miss your Open Enrollment deadline. If you do not have the documentation, you can still submit your election request. The eligibility documents can be submitted later. Supporting documentation must be submitted within 30 days of the Open Enrollment Event Date. See your agency Benefits Administrator for more information.
31.	After all dependents are added, click the Close (X) icon in the upper right-hand corner of the page. 

Step	Action
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The **Medical** page redisplay.



Medical

All of our medical choices promote wellness as part of their benefits and are available to protect you and your dependents if you become sick or injured.

Enroll Your Dependents

The following list displays all individuals who are eligible for coverage as a dependent. Dependents with a check by their name are currently enrolled on your plan. You may enroll other eligible dependents by checking the box next to their name. If you are removing a dependent, you will need to check the box next to their name.

Dependents

Dependents	Relationship
<input checked="" type="checkbox"/> Mini Wheats	Spouse
<input checked="" type="checkbox"/> Cookie Crisp	Child
<input type="checkbox"/> New Baby	Child

Enroll in Your Plan

The Family Cost showing is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select. To see other coverage cost, select the help icon next to each plan option.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Waltre				\$0.00
COVA HbA1c + Prev Den	\$54.00		\$1932.00	\$54.00
COVA HbA1c + Exp Den/Vis	\$170.00		\$1932.00	\$170.00
COVA HbA1c + Exp Den	\$140.00		\$1932.00	\$140.00
COVA High Ded Plan + Prev Den			\$1704.00	\$0.00
COVA High Ded Plan + Exp Den	\$88.00		\$1704.00	\$88.00
COVA Care + Prev Dental	\$306.00		\$1935.00	\$306.00
COVA Cr+Prev Den-Out-of-rfak	\$359.00		\$1935.00	\$359.00
COVA Care + Expanded Dental	\$395.00		\$1935.00	\$395.00
COVA Cr+Exp Den-Out-of-rfak	\$448.00		\$1935.00	\$448.00
COVA Cr+Exp Den-Vision/Hmg	\$448.00		\$1935.00	\$448.00
COVA+ExpDen-Out-of-rfak+Vcshk	\$500.00		\$1935.00	\$500.00
Sentara (Optima)	\$272.00		\$1907.00	\$272.00
TRICARE	\$161.00			\$161.00

32. Within the **Enroll Your Dependents** section, select the **Enroll** checkbox option for each dependent you want covered for the new plan year.

Dependents	Relationship
<input checked="" type="checkbox"/> Mini Wheats	Spouse
<input checked="" type="checkbox"/> Cookie Crisp	Child
<input type="checkbox"/> New Baby	Child



As you select dependents, the coverage costs below will update accordingly.



Step	Action
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The **Medical** page refreshes.

The screenshot shows the 'Medical' page with the 'Enroll in Your Plan' section. Below the 'Enroll in Your Plan' heading, there is a table of plan options. The table has columns for Plan Name, Cost (Before Tax), Cost (After Tax), Employer Cost, and Pay Period Cost. The 'Waive' option is selected, indicated by a checkmark in the 'Select' column.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Waive				\$0.00
COVA HlthAwr + Prev Den	\$54.00		\$1932.00	\$54.00
COVA HlthAwr + Exp Den&Vis	\$170.00		\$1932.00	\$170.00
COVA HlthAwr + Exp Den	\$140.00		\$1932.00	\$140.00
COVA High Ded Plan + PrevDen			\$1704.00	\$0.00
COVA High Ded Plan + Exp Den	\$88.00		\$1704.00	\$88.00
COVA Care + Prev Dental	\$306.00		\$1935.00	\$306.00
COVACr+Prev Den+Out-of-ntwk	\$359.00		\$1935.00	\$359.00
COVA Care + Expanded Dental	\$395.00		\$1935.00	\$395.00
COVA Cr+Exp Den+Out-of-ntwk	\$448.00		\$1935.00	\$448.00
COVA Cr+Exp Den+Vision&Hmg	\$448.00		\$1935.00	\$448.00
COVA+ExDen+Out-of-ntwk+Vs&Hr	\$500.00		\$1935.00	\$500.00
Sentara (Optima)	\$272.00		\$1907.00	\$272.00
TRICARE	\$161.00			\$161.00

33.

Within the **Enroll in Your Plan** section, select the Health Plan you wish to enroll in for the new plan year by clicking the corresponding **Select** button.

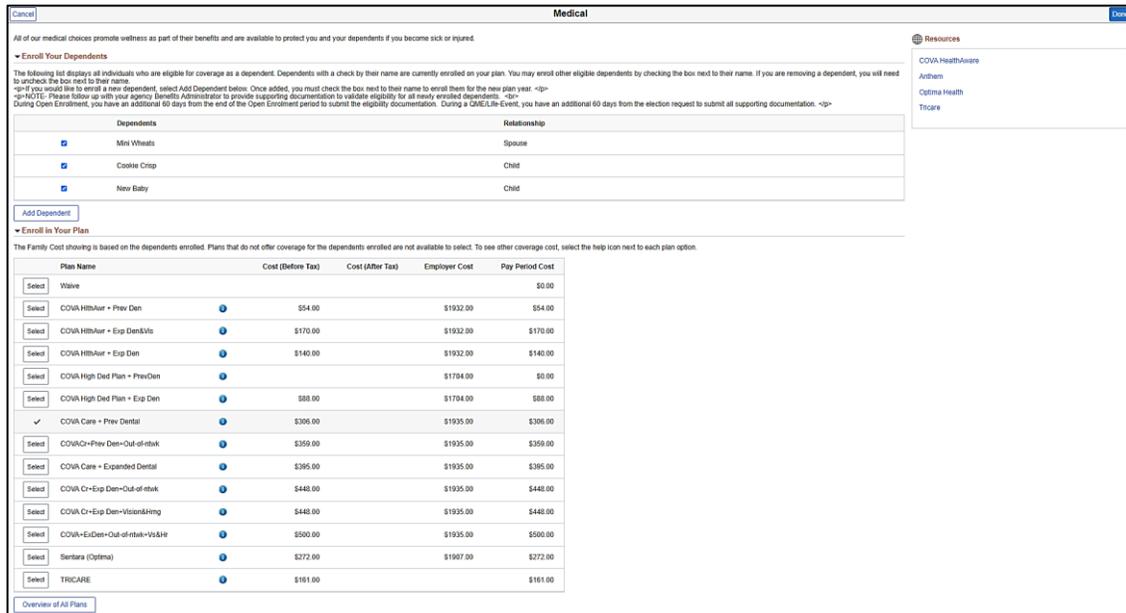
Enroll in Your Plan

The Family Cost showing is based on the dependents enrolled. Plans that do not offer coverage for the dependents enrolled are not available to select. To see other coverage cost,

	Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Select	Waive				\$0.00
Select	COVA HlthAwr + Prev Den	\$54.00		\$1932.00	\$54.00
Select	COVA HlthAwr + Exp Den&Vis	\$170.00		\$1932.00	\$170.00
Select	COVA HlthAwr + Exp Den	\$140.00		\$1932.00	\$140.00
Select	COVA High Ded Plan + PrevDen			\$1704.00	\$0.00
Select	COVA High Ded Plan + Exp Den	\$88.00		\$1704.00	\$88.00
Select	COVA Care + Prev Dental	\$306.00		\$1935.00	\$306.00
✓	COVACr+Prev Den+Out-of-ntwk	\$359.00		\$1935.00	\$359.00
Select	COVA Care + Expanded Dental	\$395.00		\$1935.00	\$395.00
Select	COVA Cr+Exp Den+Out-of-ntwk	\$448.00		\$1935.00	\$448.00
Select	COVA Cr+Exp Den+Vision&Hmg	\$448.00		\$1935.00	\$448.00
Select	COVA+ExDen+Out-of-ntwk+Vs&Hr	\$500.00		\$1935.00	\$500.00
Select	Sentara (Optima)	\$272.00		\$1907.00	\$272.00
Select	TRICARE	\$161.00			\$161.00

Step	Action
	Optionally click the blue Information icon for any of the plans to view additional information. There are also links in the Resources section of the page that can be used to view additional information.

The **Medical** page refreshes with the selected plan. A green checkmark displays for the selected plan.



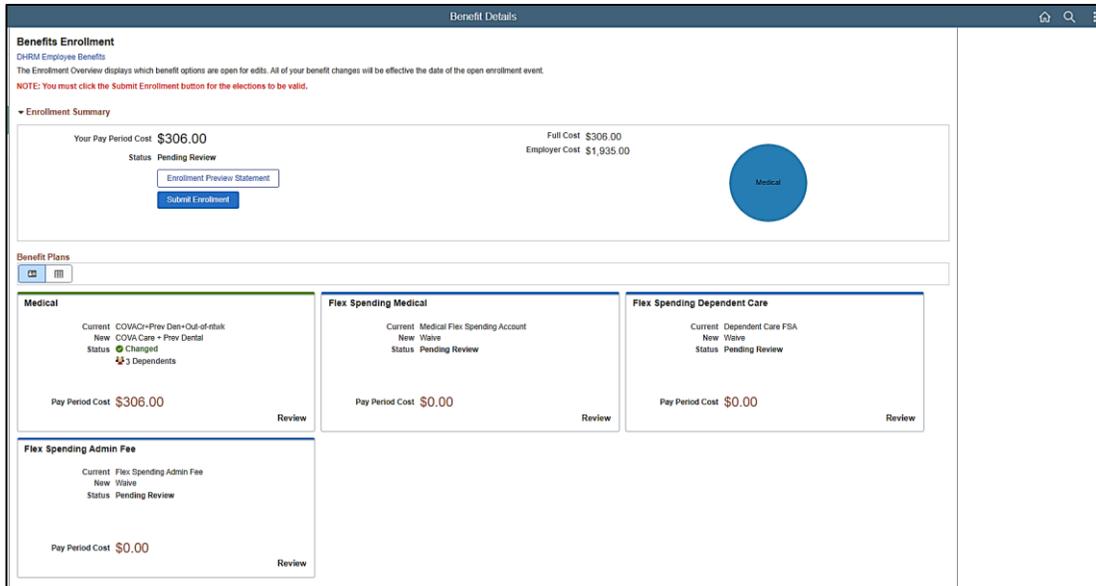
The screenshot shows the 'Medical' enrollment page. It includes a 'Dependents' section with a table listing Mini Wheats (Spouse), Colette Crisp (Child), and New Baby (Child). Below this is a table of plan options with columns for Plan Name, Cost (Before Tax), Cost (After Tax), Employer Cost, and Pay Period Cost. The 'COVA Care + Prev Dental' plan is selected, indicated by a green checkmark in the 'Select' column.

Plan Name	Cost (Before Tax)	Cost (After Tax)	Employer Cost	Pay Period Cost
Waive				\$0.00
COVA Hltbkar + Prev Den	\$54.00		\$1932.00	\$54.00
COVA Hltbkar + Exp Den&Vls	\$170.00		\$1932.00	\$170.00
COVA Hltbkar + Exp Den	\$140.00		\$1932.00	\$140.00
COVA High Ded Plan + PrevDen		\$1704.00	\$1704.00	\$0.00
COVA High Ded Plan + Exp Den	\$88.00		\$1704.00	\$88.00
<input checked="" type="checkbox"/> COVA Care + Prev Dental	\$306.00		\$1935.00	\$306.00
COVA Cr+Prev Den+Out-of-rtak	\$359.00		\$1935.00	\$359.00
COVA Care + Expanded Dental	\$395.00		\$1935.00	\$395.00
COVA Cr+Exp Den+Out-of-rtak	\$448.00		\$1935.00	\$448.00
COVA Cr+Exp Den+Vision&Hmg	\$448.00		\$1935.00	\$448.00
COVA+ExpDen+Out-of-rtak+V&Hr	\$500.00		\$1935.00	\$500.00
Sentara (Optima)	\$272.00		\$1907.00	\$272.00
TRICARE	\$161.00			\$161.00

34.	Click the Done button in the upper right-hand corner of the page. 
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Step	Action
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The **Benefit Details** page returns.



The screenshot shows the 'Benefits Enrollment' page. At the top, it displays 'Your Pay Period Cost \$306.00' and 'Full Cost \$306.00' with 'Employer Cost \$1,935.00'. The status is 'Pending Review'. Below this, there are buttons for 'Enrollment Preview Statement' and 'Submit Enrollment'. A blue circle labeled 'Medical' is visible. Under 'Benefit Plans', there are four tiles: 'Medical', 'Flex Spending Medical', 'Flex Spending Dependent Care', and 'Flex Spending Admin Fee'. Each tile shows current and new plan options, status, and pay period cost.

35. Review the updated information in the **Medical** tile.



The 'Medical' tile is shown with a red box highlighting the following information:
 Current COVACr+Prev Den+Out-of-ntwk
 New COVA Care + Prev Dental
 Status ● Changed
 3 Dependents
 Pay Period Cost \$306.00
 Review



The **Medical** tile now displays the coverage selected in the **New** row and the number of dependents enrolled along with the Pay Period Cost for the new plan year. Additionally, the **Medical** tile now has a Status of "Changed".

36. Click the **Flex Spending Medical** tile.



The 'Flex Spending Medical' tile is shown with a red box highlighting the following information:
 Current Medical Flex Spending Account
 New Waive
 Status Pending Review
 Pay Period Cost \$0.00
 Review

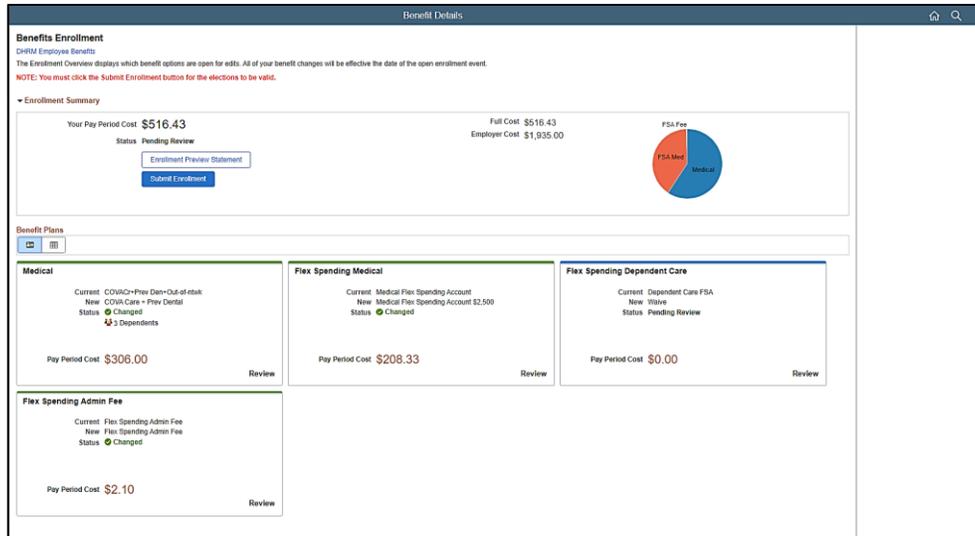


Flex Spending accounts must re-elected each year (it is currently waived in this example but will be elected for this plan year).

Step	Action
	<p>The Flex Spending Medical page displays.</p> 
37.	<p>Click the Select button to elect the Flex Spending Medical plan.</p> 
	<p>The Flex Spending Medical page refreshes.</p> 
38.	<p>Enter the applicable amount in the Annual Pledge field. The amount entered must be the amount you want to come out of your pay for the entire plan year.</p> 
39.	<p>Click the Done button in the upper right-hand corner of the page.</p> 

Step	Action
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The **Benefit Details** page redispays.



The screenshot shows the 'Benefits Enrollment' page with the following details:

- Enrollment Summary:** Your Pay Period Cost: \$516.43, Full Cost: \$516.43, Employer Cost: \$1,935.00. Status: Pending Review. Buttons: Enrollment Preview Statement, Submit Enrollment.
- Benefit Plans:**
 - Medical:** Current: COVID-19 Plan Out-of-stk; New: COVID Care + Prev Dental; Status: Changed; 4-5 Dependents; Pay Period Cost: \$306.00.
 - Flex Spending Medical:** Current: Medical Flex Spending Account; New: Medical Flex Spending Account \$2,500; Status: Changed; Pay Period Cost: \$208.33.
 - Flex Spending Dependent Care:** Current: Dependent Care FSA; New: Waive; Status: Pending Review; Pay Period Cost: \$0.00.
 - Flex Spending Admin Fee:** Current: Flex Spending Admin Fee; New: Flex Spending Admin Fee; Status: Changed; Pay Period Cost: \$2.10.

40. Review the updated information in the **Flex Spending Medical** tile.



Flex Spending Medical

Current: Medical Flex Spending Account
 New: Medical Flex Spending Account \$2,500
 Status: ● Changed

Pay Period Cost: **\$208.33**

Review



The **Flex Spending Medical** tile now displays the plan as selected in the **New** row along with the Pay Period Cost for the new plan year. Additionally, the **Flex Spending Medical** tile now has a Status of “Changed”.

41. Review the **Flex Spending Admin Fee** tile. Once either a Flex Spending Medical or Flex Spending Dependent Care plan is enrolled in, the system automatically enrolls you in the Flex Spending Admin Fee and this cannot be updated. If you are not enrolling in a Flex Spending Dependent Care plan, skip to Step 46.



Flex Spending Admin Fee

Current: Flex Spending Admin Fee
 New: Flex Spending Admin Fee
 Status: ● Changed

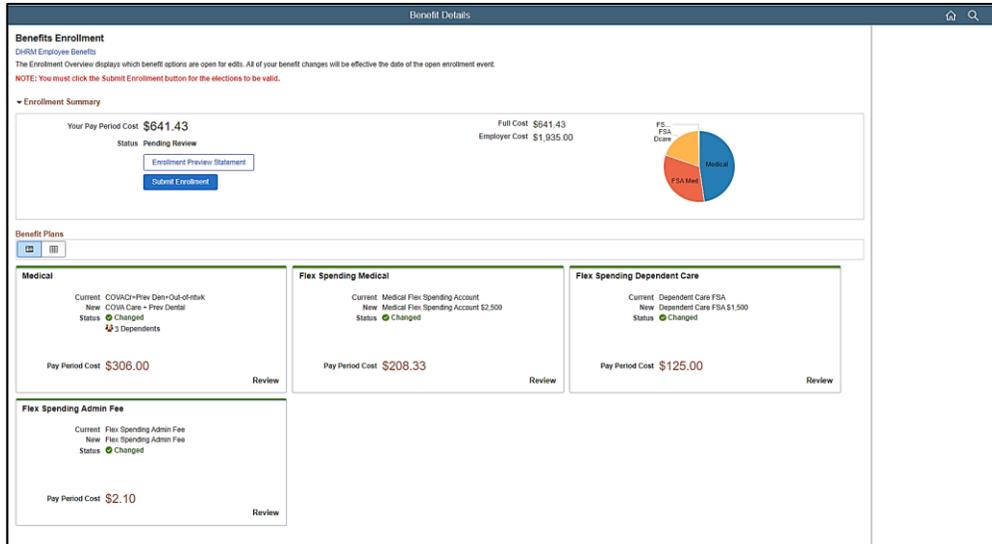
Pay Period Cost: **\$2.10**

Review

Step	Action
42.	<p>Click the Flex Spending Dependent Care tile.</p> 
	<p>Flex Spending accounts must re-elected each year (it is currently waived in this example but will be elected for this plan year).</p>
<p>The Flex Spending Dependent Care page displays.</p> 	
43.	<p>Click the Select button to elect the Flex Spending Dependent Care plan.</p> 
<p>The Flex Spending Dependent Care page refreshes.</p> 	
44.	<p>Enter the applicable amount in the Annual Pledge field. The amount entered must be the amount you want to come out of your pay for the entire plan year.</p> 

Step	Action
45.	Click the Done button in the upper right-hand corner of the page. 

The **Benefits Details** page redisplay.

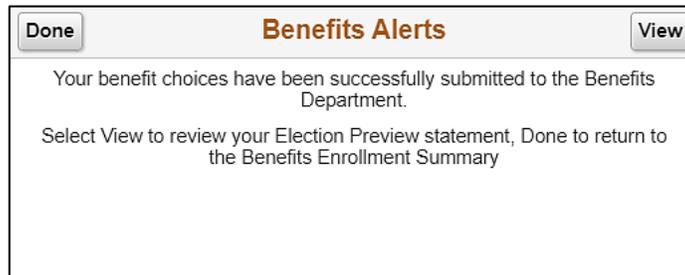


The screenshot shows the 'Benefits Enrollment' page. At the top, it displays 'Your Pay Period Cost: \$641.43' and 'Full Cost: \$641.43' with 'Employer Cost: \$1,935.00'. A pie chart shows the breakdown: FSA, FSA (Med), and Medical. Below this, there are sections for 'Benefit Plans' including 'Medical', 'Flex Spending Medical', 'Flex Spending Dependent Care', and 'Flex Spending Admin Fee', each with a 'Review' button.

46.	Review your elections and then click the Submit Enrollment button. 
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	This step must be performed to submit your open enrollment elections.
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A **Benefits Alerts** message displays in a pop-up window.

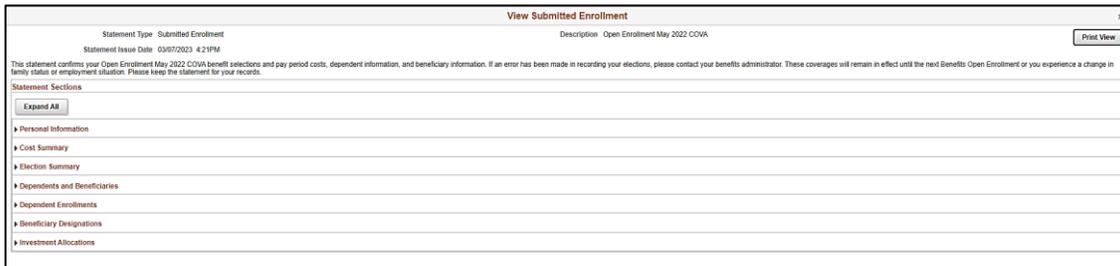


The screenshot shows a 'Benefits Alerts' pop-up window. It has 'Done' and 'View' buttons. The text inside reads: 'Your benefit choices have been successfully submitted to the Benefits Department. Select View to review your Election Preview statement, Done to return to the Benefits Enrollment Summary'.

47.	Click the View button to review your Election Preview Statement. 
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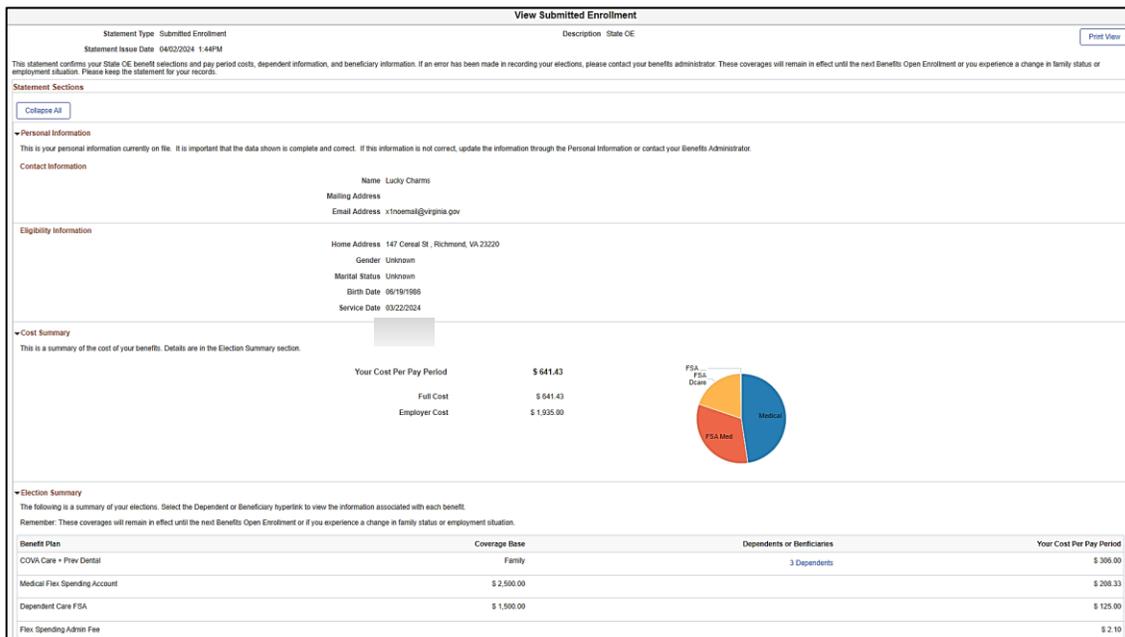
Step	Action
	If you don't want to review your Election Preview Statement, click the Done button and you have completed the open enrollment process.

The **View Submitted Enrollment** page displays.



48.	Click the Expand All button. 
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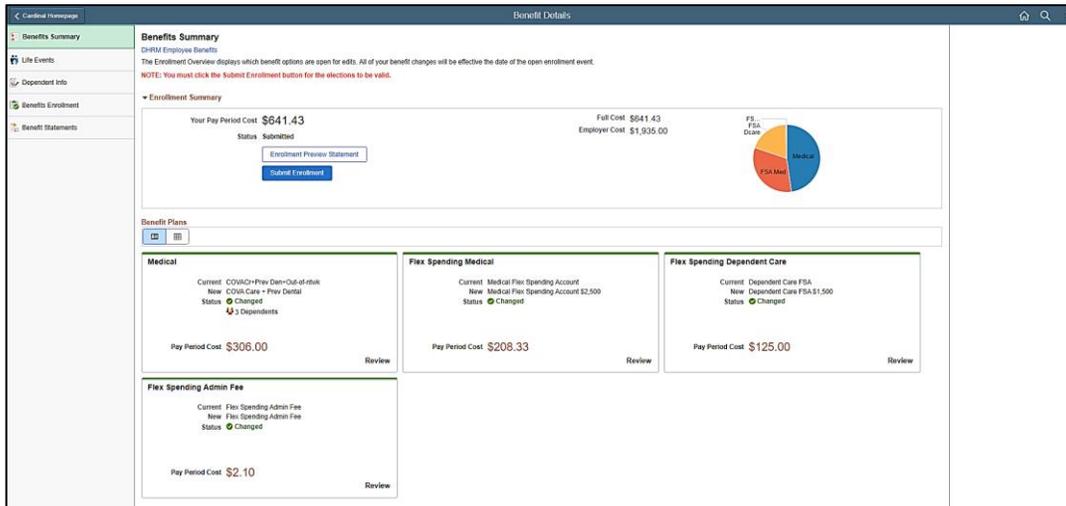
The page refreshes and the detailed information displays.



49.	Review the enrollment information as needed. Optionally, click the Print View button to print the Election Preview Statement. 
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Step	Action
50.	Once complete, click the Close (X) icon to return to the Benefit Details page. 

The **Benefit Details** page redisplay.



The screenshot shows the 'Benefit Details' page with the following information:

- Benefits Summary:**
 - Enrollment Overview displays which benefit options are open for edit. All of your benefit changes will be effective the date of the open enrollment event.
 - NOTE: You must click the **Submit Enrollment** button for the elections to be valid.
- Enrollment Summary:**
 - Your Pay Period Cost: **\$641.43** (Status: Submitted)
 - Full Cost: \$641.43
 - Employer Cost: \$1,935.00
 - Buttons: Enrollment Preview Statement, Submit Enrollment
 - Chart: Pie chart showing FSA, FSA Other, and Medical costs.
- Benefit Plans:**
 - Medical:** Current: COVID-19 Plan Out-of-Pocket; New: COVID Care + Prev Dental; Status: Changed; 3 Dependents; Pay Period Cost: \$306.00
 - Flex Spending Medical:** Current: Medical Flex Spending Account; New: Medical Flex Spending Account \$2,500; Status: Changed; Pay Period Cost: \$208.33
 - Flex Spending Dependent Care:** Current: Dependent Care FSA; New: Dependent Care FSA \$1,500; Status: Changed; Pay Period Cost: \$125.00
 - Flex Spending Admin Fee:** Current: Flex Spending Admin Fee; New: Flex Spending Admin Fee; Status: Changed; Pay Period Cost: \$2.10

51.	Click the Benefits Enrollment menu item on the left-hand side of the page. 
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The **Benefits Enrollment** page redisplay.



The screenshot shows the 'Benefits Enrollment' page with the following information:

- Lucy Charris, Admin and Office Spec III**
- Benefits Enrollment:** After your initial enrollment, the only time you may change your benefit choices is during open enrollment or a life event. The information icon provides you with additional information about your enrollment. The Start button next to an event means it is currently open for enrollment. Use the Start button to begin your enrollment.
- Note: Some events may be temporarily closed until you have completed enrollment for a prior event.
- Your Benefit Events:**

Event Description	Event Date	Event Status	Job Title
Open Enrollment	07/01/2024	Submitted	Admin and Office Spec III



The Event Status now displays as “Submitted”. If you added a dependent during the open enrollment process, you must now submit the supporting documentation to your agency Benefits Administrator for the coverage to be transmitted to the Health Benefits Vendor. Supporting documentation must be submitted within 30 days of the Open Enrollment Event Date.

Congratulations! You have completed the benefit enrollment process for Open Enrollment. You will receive an email with your open enrollment confirmation statement.